



2016 Western On-Site Legal Training
Pre-Registration Form
22-24 January 2016



1. Please fill out the pre-registration form completely and legibly.
2. Pre-registration forms must be sent to SSG Carlo Lazo at carlo.m.lazo.mil@mail.mil **NLT 1 JAN 2016**.

PERSONAL INFORMATION

Prefix/Rank: _____ Name: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone: _____ Home/Cell Phone: _____

E-Mail: _____ Component (TPU/AGR/IMA/IRR/AD): _____

Emergency Contact Name and Phone Number: _____

Unit of Assignment: _____ Unit Phone Number: _____

Duty Position: _____ Military Service Branch: _____ Branch Code/MOS _____

State Bar(s) Admitted _____ I will be staying at (Hotel) _____

I have registered in ATRRS ____ Yes ____ No (ATRS registration is Mandatory to attend this course)

* DATA REQUIRED BY THE PRIVACY ACT: **Authority:** 10 USC 3021 (B) and (G). **Principal Purpose:** To obtain information necessary to administer student participation in training courses. **Routine Use:** Used to process applications for training, record student information in the Army Training Requirements and Resources System (ATRS), maintain student records, and perform administrative functions inherent in student administration. **Disclosure:** Failure to provide information could result in applicant not being able to attend the On-Site course and or get the requisite credit for attendance.